

Harnessing Ghana's demographic dividend: opportunities and challenges

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Abstract

Ghana's population has witnessed sustained fertility transition over the past two decades with a built-in demographic dividend that has to be harnessed to the country's development advantage. This paper examines Ghana's population and development nexus to highlight areas which present dividends to be tapped. The paper focuses on four key areas: economy, education, health and governance. It shows that Ghana is at a stage where conscious efforts have to be made to reap the benefits of the on-going demographic dividend that is associated with the country's fertility transition since it will not come automatically. Yet, it will require an appreciation at the highest levels of government and among key stakeholders of the central place population should be accorded in national development discourse, backed by high-level political commitment and determination to implement population-related policies and programmes to avoid Ghana's current population dynamics posing serious challenges towards attaining a higher middle-income status.

Introduction

Development is generally concerned with improving the welfare of human beings. One of the goals of development policies, therefore, is to create an environment for rapid economic growth. This goes beyond just increased productivity to include the resulting rise in the ability of people to improve their level of living. Population thus appears at the very centre of all development efforts because it is both the subject and object of development. The economic successes of the "Asian Tigers" during the 1960s and 1970s have brought this forcefully to the fore because a close relationship has been found between the transformation of their population structure and the equally remarkable transformation of their economies during the period. This has led to a comprehensive way of thinking about how different sectors can work together to make this growth a reality. It is the belief of many analysts that what has been referred to as the "demographic dividend" explains the experience of the Asian Tigers and is key to the miracle thereby creating a sense of optimism for improving the economic well-being of developing countries, especially in sub-Saharan Africa.

The demographic transition theory suggests that in the early stages of economic development, population growth may simultaneously stimulate and be spurred by economic development. To sustain that economic momentum in the short run may depend more on social, political, organizational, cultural and economic factors than on population growth. However, to reach high levels of income in the long run may require that the rate of population growth slows substantially. The observation has thus been made that the relationship between population growth and economic development changes in rough accordance with the stage of the demographic transition through which a country is passing (Weeks, 2012). It must be noted that the single most important demographic element is probably the age structure, rather than the total population size. Thus what matters is how the numbers of people at different ages are increasing. A study by Crenshaw et al. (1997, quoted in Weeks, 2012) reveals that an increase in the child population hinders economic progress. On the other hand, an increase in adult population relative to other ages fosters economic development, producing what is called a demographic windfall effect whereby the demographic transition allows a massive, one-time boost in economic development as rapid labour force growth occurs in the absence of burgeoning youth dependency.

The demographic dividend, therefore, refers to the accelerated economic growth that begins with changes in the age structure of a country's population as it moves through the demographic transition from high to low birth and death rates. With fewer young people relative to the population of working-age adults, and with the successful implementation of key national policies over the long term, a country may reap many rewards from its demographic dividend. In addition to the Asian Tigers, this has already taken place in countries such as Thailand and Brazil. However, this does not happen automatically in the absence of the needed population, social and economic policies. Countries that have earned a demographic dividend have invested in human capital (health and education), implemented sound economic and governance policies, and sustained the political commitment necessary to make the most of the opportunity (Gribble and Bremner, 2012)

The 2012 *Ghana Social Development Outlook (GSDO 2012)* published by the Institute of Statistical, Social and Economic Research (ISSER) examined Ghana's population within the context of the social and economic development of the country. It examined the population-development nexus, the policy environment for managing population in the country and provided an overview of Ghana's population. The key variables, including fertility, mortality, migration and urbanization as well as the ethnic composition of the country, were examined (ISSER, 2013a). Not much change has occurred in these key demographic variables within two years. However, there are relevant aspects of Ghana's demographic transition which the *GSDO 2012* did not put much emphasis on. This is particularly with respect to the demographic dividend that is associated with Ghana's demographic transition which the country has to take advantage of to realize its development goals.

In the light of the foregoing, this chapter attempts to present a review of Ghana's population dynamics and trends to highlight the relevant implications for the country's development within the context of the demographic dividend and the prospects for the country in harnessing it. It considers the strategic investments that must go into the areas of the economy, education, health and governance in order to take advantage of the situation. This is preceded by a critical re-examination of the population-development nexus in Ghana with a view to bringing to the fore the relevance of the demographic dividend and how to ensure that Ghana realizes the opportunities its population dynamics present for its sustainable development.

1.0 Overview of Ghana's Population Dynamics and Policy Implementation

Ghana's population has recorded high growth rates in the past but in recent times has seen remarkable decline in terms of fertility, although with little corresponding rise in the contraceptive prevalence rate. The population growth rate has declined from a little less than 3 percent in the 1960s to 2.5 percent between 2000 and 2010. Fertility has steadily declined and has since 1998 plateaued at about four children per woman. Interestingly, the contraceptive prevalence rate for any modern method among currently married women is still low at 23.4

percent according to the 2011 Multiple Indicator Cluster Survey (MICS), although this is higher than in 2008 when it was at 17.5 percent. Significant drops in the level of fertility without marked increases in contraceptive prevalence can only be explained in terms of major changes in postpartum variables – duration of postpartum abstinence, amenorrhoea, breastfeeding and induced abortion. The contribution of the postpartum variables to the fertility decline dropped from 65 percent in 1998 to 57 percent in 2003 and to 44 percent in 2008. The contribution of contraceptive use increased slightly from 12 percent in 1998 to 13 percent in 2003 and then fell to 9.3 percent in 2008. The contribution of induced abortion to births averted climbed up from 10 percent in 1998 to 20 percent in 2003 and then rose to 27 percent in 2008. The total population of Ghana – up from less than 7 million in 1960 to 24.6 million in 2010 (Ghana Statistical Service, 2013) – could, therefore, be much higher had it not been for the relatively slower growth of the population in recent times brought about by changes in these postpartum variables.

It is, however, unlikely that postpartum variables can hold back the momentum for long. To complete the transition, contraceptive prevalence needs to be substantially stepped-up. Once again, experience indicates that in countries where below replacement-fertility levels have been reached, contraceptive prevalence levels range between 65 and 70 percent and, in some cases, rise to 85 percent. It has also been noted that below-replacement levels are usually not attained with contraceptive prevalence of less than 50 percent; levels of 70 percent are more common among populations with very low fertility. Thus, for populations to reach replacement levels, they need to reach high levels of use of effective modern contraceptive methods.

Following the changing dynamics of Ghana's population, there has been rapid urbanization. The proportion of the population living in urban areas or settlements has increased from 23.1 percent in 1960 to 43.8 percent and 50.9 percent respectively in 2000 and 2010. Thus, more than half of the total population of Ghana in 2010 was recorded to be resident in communities classified as urban in 2010. Comparatively, the annual growth of urban localities between 2000 and 2010 has been estimated at 4.2 percent compared to 2.5 percent for the entire population. The rapid urbanization has resulted from both natural increase and migration of youth from rural to urban localities. The high population of young people visible along the main arteries selling anything

their hands find has been a characteristic feature of the main cities, particularly Accra and Kumasi. The “*kayaye*” phenomenon is also fast becoming a permanent feature of most urban localities in the country.

Accompanying the rapid urbanization has been the challenge of youth unemployment, increasing crime rates, urban housing deficit and pressure on urban infrastructure and facilities including deteriorating sanitation, all of which have implications for the health of the human population. Traffic congestion on urban roads is also increasingly becoming part and parcel of the urban space with consequences for productivity.

At the same time, there are indications that the Ghanaian population is beginning to show signs of ageing. According to Ghana’s population censuses since 1960, the population of the elderly 65 years and above increased from 3.2 percent in 1960 to 3.6 percent in 1970, 4.0 percent in 1984 and 5.3 percent in 2000. However, it declined to 4.7 percent in 2010 (See Ghana population census reports, 1960-2010). In spite of the decline between 2000 and 2010, in terms of absolute numbers, the population of the elderly has increased from 215,258 in 1960 to 1,643,978 in 2010 (Kwankye, 2013). This suggests that the country is confronted with the challenge of ensuring that there is a sustained social security and pension scheme to cater for an increasing number of “senior citizens” who may be largely dependent on a huge population of youth that is either unemployed or underemployed. Therefore, while considering the large youthful population of the country to address its needs, serious attention has to be paid to the increasing ageing population.

Realising the important role population plays in the development activities of the country, efforts have been made – since 1969 when the first comprehensive population policy was adopted – to manage Ghana’s population to make it an asset rather than a liability. As stated in the *GSDO 2012*, the 1969 population policy was implemented for more than two decades and was reviewed in 1994 and replaced with a revised policy. The 1994 policy marked a departure from what was put in place in 1969 in that the dominance of family planning in programme implementation was

changed with a broader scope to cover both family planning and non-family planning aspects of population management. More specifically, there are issues pertaining to population and development, reproductive health, maternal and child health, environment, migration and urbanization. The issue of adolescent fertility and reproductive health also became very topical, to the extent that in 2000, a policy was dedicated to adolescent reproductive health in Ghana. However, little attention was given to climate change and climate variability as they impact on livelihoods. Yet, climate change-related challenges are fast becoming common in the current discourse on sustainable development not only in Ghana but also in many countries across sub-Saharan Africa. Thankfully, the revised 1994 population policy is currently being considered for further review and, therefore, it is anticipated that it will include climate change issues that have the potential to affect agricultural production and food security, urban housing and further rural-urban migration as an adaptation mechanism in response to climate change and weather variability in the country.

The implementation of the 1994 revised population policy has so far benefited from an elaborate institutional framework that has reinforced the multifaceted nature of population issues in the country. The National Population Council (NPC) was established by Act 485, 1994, in the Office of the President to be responsible for the coordination of all population-related programmes and activities in the country and to advise the President on the appropriate policy decisions and actions to address the negative challenges that may be associated with population dynamics. Location of the NPC in the Office of the President was to insulate it from the monopoly of any one ministry or sector and also to give population issues the pre-eminence they deserve. With its national secretariat in Accra, the NPC has regional offices that are also expected to liaise with the district assemblies in coordinating population activities within the regions.

While this elaborate institutional framework is quite good, it was only in late 2013 that a Minister of State in the Office of the President was appointed to provide oversight responsibility for the NPC and, by extension, population issues in the country. This has been a departure from the old order where no one provided a voice for population issues at the highest level of Cabinet. It is hoped that this arrangement will give population a voice in high-level political discourse so

as to attract needed national attention and resources for effective coordination of population programme activities.

Much has been achieved, but a lot remains to be done to realize the goals of population policy in Ghana. For example, Ghana is yet to achieve the full, functional integration of population variables into its development planning activities at all levels of programme implementation. Unmet need for family planning is still high at 26 percent among women aged 15-49 years which is classified in terms of spacing births (16 percent) and limiting births (10 percent) according to the 2011 MICS (GSS, 2013a). Unmet need for limiting births, according to the 2011 MICS Report (Reproductive Health Extract) refers to “the percentage of women who are not using a method of contraception AND are not pregnant and not postpartum amenorrheic and are fecund and want to wait for two or more years for their next birth” OR “are not pregnant and not postpartum amenorrheic and are fecund and unsure whether they want another child” OR “ are pregnant and say that pregnancy was mistimed: would have wanted to wait” OR “are postpartum amenorrheic and say that the birth was mistimed: would have wanted to wait” (GSS, 2013a: 24). On the other hand, unmet need for limiting births is with regard to persons who want to limit their births but are not using any methods of contraception in spite of being fecund and sexually active.

Persons with unmet need for contraception are relatively less difficult to convert from non-use to use of contraception. And again, the use of contraception is likely to have a positive impact on infant and maternal health. It was in line with this reasoning that in 2013, the National Health Insurance Law was revised to include the clinical methods of family planning in the benefits package of the scheme (Government of Ghana, 2013). The cost implications of this policy have been determined through a family planning costing study undertaken in 2013 for the consideration of the National health Insurance Authority. It is hoped that when this policy is fully rolled out for implementation, it will further reduce unmet need and unwanted fertility and thereby reduce maternal and infant deaths.

Ghana's Population and Development Nexus: The Demographic Dividend

The interrelationship between population and development was well articulated at the International Conference on Population and Development (ICPD) in Cairo, Egypt, in 1994 with the recommendation that countries should ensure the functional integration of population variables into development planning activities. Since 1994, some progress has been made while challenges continue in Ghana's efforts towards bridging the gap between population growth and economic growth/development.

However, Ghana's demographics depict a country that is on the verge of taking advantage of a demographic dividend. The demographic dividend is reflected in the growth and structure of the population. Ghana's population has a broad-based age structure that has an inherent feature of a youthful population characterized by high levels of unemployment and underemployment. According to the national population censuses since 1960, the population under 15 years stood at 44.5 percent in 1960, rose to 46.9 percent in 1970 and then declined to 45 percent in 1984. It further declined to 41.3 percent and 38.3 percent respectively in 2000 and 2010 (Table 1). This shows that the population below 15 years has consistently declined since 1970. In contrast, the population of youth aged 15-24 years has generally increased from 16.8 percent in 1960 to 20.0 percent in 2010.

More importantly, the economically active age group, 15-64 years, has increased from 49.5 percent in 1970 to 57.0 percent in 2010. This translates into a decline in the dependency ratio from a high of 102 in 1970 to 76 in 2010. On the other hand, the elderly population 65 years and over has seen some increase from 3.2 percent in 1960 to 5.3 percent in 2000 but then declined to 4.7 percent in 2010 (GSS, 2013:54) perhaps due to distortions from age misstatement in the census data. In terms of annual population growth, the records indicate that Ghana's population has grown by an average of between 2.4 percent and 2.7 percent, with the 2000-2010 period recording a 2.5 percent annual growth rate.

The implications of such an age structure are varied. As a nation, a lot depends on how we position ourselves to take advantage of the opportunities it offers while taking steps to address the challenges that are associated with it. The high proportion of children's population presents a

case for the country to build into its development planning the expansion of school infrastructure not only at the base (basic level) but also at the secondary and higher levels to enable greater access to education. The expansion in school infrastructure should necessarily be accompanied by the training of more teachers with improved remuneration to provide quality education at all levels of learning. At the same time, health infrastructure requires expansion and should be backed by the training of more health personnel with enhanced remuneration to take care of the health needs of the population.

Table 1: Ghana’s population, by age group (%), median age and dependency ratio, 1970-2010

| Age/indicator | 1970 | 1984 | 2000 | 2010 |
|------------------------|------|------|------|------|
| Population below 15 | 46.9 | 45.0 | 41.3 | 38.3 |
| Population 15-24 | 17.0 | 18.7 | 18.4 | 20.0 |
| Population 15-64 | 49.5 | 51.0 | 53.4 | 57.0 |
| Population 65 and over | 3.6 | 4.0 | 5.3 | 4.7 |
| Median age | 16.6 | 18.1 | 19.4 | 20.7 |
| Dependency Ratio | 102 | 96 | 87 | 76 |

Source: Ghana Statistical Service, Population census reports, 1970-2010.

The population of adolescents and young adults increased from 1.1 million in 1960 to 3.5 million in 2000 and 4.9 million in 2010 and is expected to climb to 5.3 million in 2015 (GSS, 2013). The projected figures indicate that the youthfulness of the population will persist for a considerable length of time and the rapid expansion of this segment of the population will continue in the 21st century. A situation in which 20 percent or more of a population is aged 15-24 years has been described as “Youth Bulge”, a phenomenon that may subject a society to potentially disruptive, political and social movements. The rapid growth of the adolescent and youth population exerts increased pressure to expand education and health services and employment opportunities. As the youth population increases, there is the likelihood of an upsurge in smoking, drinking, drug use, unprotected sex (prevalence of HIV/AIDS and STIs) and armed robbery, particularly among the youth, as is currently being witnessed in some Asian countries. In Ghana, many media

reports of armed robbery cases have had young people involved as the perpetrators, a situation that has been fueled by high youth unemployment.

Furthermore, the population dynamics in Ghana currently reveal a situation of rapid urbanization which is partly due to rural-urban migration, resulting in urban primacy with high unemployment rates in the cities. Housing challenges abound in Ghana's cities and towns, with slums fast developing amidst environmental deterioration due to the largely unregulated disposal of household garbage with its immense health implications for the population. In recent times, there has been a recurrence in some of Ghana's cities of the demolition of buildings constructed without authorization. In recent times, there have been repeated reports of demolition exercises in unauthorized settlements, particularly in Tema and Accra, which have led to several people being made homeless. This is another by-product of rapid urbanization which has led many people to find shelter on any available land regardless of building policies and regulations. This practice also contributes to the perennial flooding that some cities in Ghana experience, with dire consequences for human lives and property.

The indications are that Ghana is going through a demographic transition. Fertility has been declining steadily against a mortality level that has remained low for some time now. Although the resultant rate of population growth is still high, it has shown some decline in recent times. A reflection of this is the declining proportion of the child and adolescent population relative to the working-age adult population which is increasing (Table 1). When that continues, families and governments can now release funds that would have gone into the health and well-being of children into investment in other fields that will boost the development of the nation. Ghana is, therefore, poised to take advantage of a demographic dividend. As a first step, every effort must be made to ensure that the decline in fertility continues.

Towards Realization of the Demographic Dividend in Ghana

The Economy

As explained earlier, the demographic dividend is all about the economic transformation that begins with changes in the age structure as a result of the movement of a country's population

from high to low birth and death rates. Since the transformation does not come automatically, there must be in place economic policies that promote growth. Efforts in the health and education sectors must be backed by supportive economic policies that create jobs for the large population of youth and harness the power of the age structure transformation. The government must shift economic priorities into sectors that can absorb today's youth, such as manufacturing, service and technology. There must be a deliberate attempt at ensuring that in the workforce, women and men have equal opportunity and skills. With careful planning, more women can transition into higher paid jobs as they now have fewer children and high quality education.

Trade must feature prominently in the economic policies. Trade policies must ensure that local products have access to international markets and can create demand. This involves the promotion of free trade and open markets, the attraction of foreign and domestic investment and the growth of the private sector. To be able to achieve this, policies are needed to provide incentives for people to save and invest domestically. Access to rural and poor communities must be expanded through micro finance and targeted programmes. As the size of the working-age population increases and the economy becomes more diversified, a flexible and cross-trained labour force becomes a necessity. The government must give tax incentives to encourage local and foreign investment, and also provide basic infrastructure and improve the condition of the ports as well as that of the roads, transportation and communication.

Creating “quality employment” is at the core of the demographic dividend. However, in Ghana the employment situation cannot be effectively monitored because there are no consistent and regular labour market statistics. The best source of labour force market data is a labour force survey but Ghana is yet to carry out one. Currently, about 65 percent of the active working force are self-employed, 60 percent for males and 69 percent for females. As much as 86.1 percent of the working population in Ghana is in the informal sector. Between 2000 and 2010, total employment increased from 7.4 million to 10.2 million, representing about 3.3 percent average annual growth (3.5 percent in the informal sector, 2 percent in the public sector and 1.4 percent in the private formal sector). Most of the jobs created were in the informal sector (Baah-Boateng, 2013).

Within the same period, 5.8 percent of the labour force was unemployed if we apply the common definition of unemployment, which classifies unemployed persons as those who did no work for profit or wages in the seven days preceding the census but were actively looking for jobs. However, if we apply a broader definition of unemployment, which is in reference to persons who are jobless or have non-sustainable jobs and are actively looking for more sustainable jobs, the sum of the broad unemployed and jobless people available for work stands at 18.1 percent. In terms of quality of employment, 7 out of every 10 workers are engaged in vulnerable employment, with only 23.1 percent of total employed people in productive employment (ISSER, 2013b, Table 8.2, p.198).

According to the ILO, “vulnerable employment” is a newly defined measure of persons who are employed in relatively precarious circumstances as indicated by the status in employment. Because contributing family workers and own account workers are less likely to have formal work arrangements, their access to benefits or social protection programmes are more “at risk” to economic cycles. These are the statuses categorized as “vulnerable” (ILO, 2009, p. 28). Productive employment, on the other hand, is measured by the sum of regular employment with employees.

In general, economic growth in Ghana has failed to translate into decent, gainful and productive employment generation. This slow response of employment to economic growth is largely linked to slower growth of the labour-intensive sectors. Employment elasticity of output for Ghana dropped from 0.6 in 1996 to 0.4 in 2004-2008 (ILO, 2008). Although the economy grew by 14.4 percent in 2011, about half of this was from petroleum production, which offered direct employment to fewer than 100 people. There is evidence that the supply side of employment is facing some challenges. While the working population increased by 3.2 percent annually between 2000 and 2010, employment expanded by just 3.3 percent. Yet very little of the paltry increase consisted of “decent” and productive jobs. A lot depends on the quality of human resources available for employment. The highest level of education of at least 76 percent of the working age population in 2010 and about 87 percent of the employed in 2006 was basic

education (ISSER, 2013b, p. 213). There is, therefore, some level of skill mismatch in the country and there is a gap between industry and training institutions in terms of teaching and design of curricula.

This is not surprising because over the years, employment issues have been treated as residual outcomes of macro-economic and sectoral policies. This could be blamed on weaknesses of the regulatory framework of the labour market. While only the formal sector is covered by the Labour Act, the sector employs only about 14 percent of the working population (ISSER, 2013b, p. 217). This begs the question: what public policy exists for the greater proportion of actors who operate within the informal segment of the market? To be able to harness the demographic dividend there is the need for labour market flexibility and safety nets. Without the right policies there will be slow adaptation to the changing age structure. Also, if decent job opportunities do not match the increasing working-age population, demographic penalties will be the result. To ensure a diversification of sources of decent jobs, there is the need to emphasise inclusive growth as we discuss the demographic dividend. This calls for more policy attention to the informal sector that is matched by other policies that promote gender equality, such as access to credit and the right to inherit property and assets, so as to create an environment that empowers women to save and invest.

Education

Education plays a cross-cutting role in the effort to reap the demographic dividend. As noted above, the starting point is the population structure and the resulting dependent population. To get there requires investment in three key areas, namely, child survival, spacing of births and prevention of unintended pregnancies, and education of girls. These require strategic investment in four key areas: health, education, economy, and governance.

Under health, education helps to keep children healthy, directly through mother education and indirectly through many other factors. No economic policy can succeed without tailoring its demand to educational planning. Policies to attract investment require a better educated workforce. A responsive labour force certainly derives from responsive educational policies. All

this must take place within an atmosphere of good governance where everybody fully participates in the running of the country. Education promotes this free society and develops people who know their rights and fight for them. Above all, education brings experiences from elsewhere to the people thereby making both the people and the country benefit positively from globalization.

To grow a country's economy, both boys and girls must have access to education. For girls, education, especially at secondary level, delays marriage and first pregnancy. There is also the need to adapt education policies in response to changing labour market needs. The labour force needs training for lower-skilled and labour-intensive work and for more efficient and more value-added agricultural production. To make the economy competitive in a globalized world, skills in business, technology and other professions have to be developed.

The Asian Tigers – Hong Kong, South Korea, Singapore and Taiwan – present us with very good examples. To position itself to take advantage of the demographic dividend that was on the horizon, South Korea changed its educational policy from compulsory primary education to “production-oriented” education. This involved a focus on knowledge and skills needed for economic development. This move led to 97 percent of school-aged children attending school as against 54 percent before the implementation of the policy. This improvement in education coincided with a drop in fertility from 5.4 children in 1950 to 2.9 in 1975. There was also a strong central government at the time of the economic and demographic transition which drew up integrated and comprehensive development plans over several decades. The government also managed to eliminate a tradition that favoured gender inequalities, replacing it with one that gave equal opportunity to all. Among other things, this measure led to a reduction in sex ratio at birth of 116 boys for every 100 girls to about 107 currently (Gribble and Bremner, 2012).

Ghana's education has made considerable strides since independence. Currently, gross enrolment at primary level is 100 percent while net enrolment rate is around 74 percent (Table 2). This suggests that Ghana has not yet achieved universal basic education, which is enshrined in the country's Constitution. The figures also mean that a reasonable proportion of Ghanaian children

are above the normal age for enrolment in primary school and that many children are experiencing delays and repetitions (Guengant, 2011).

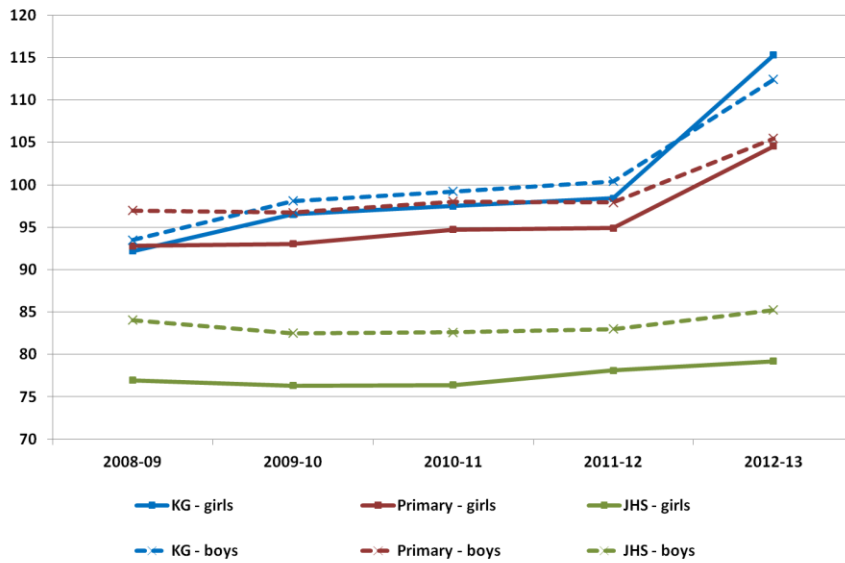
Table 2: Ghana education indicators, 1970-2010

| Years | 1970 | 1980 | 1990 | 2000 | 2010 |
|-----------------------------------|------|------|------|------|-------|
| Adult pop. able to read and write | | | | 57.9 | 74.1 |
| Primary education: | | | | | |
| - Gross enrolment rate | 65.2 | 73.9 | 77.6 | 83.5 | 101.8 |
| - Net enrolment rate | - | - | 56.4 | 62.9 | 73.9 |
| - Completion rate | 62.9 | 62.4 | 63.7 | 69.5 | 79.2 |
| - Student-teacher ratio | 29.7 | 27.8 | 27.5 | 33.8 | 31.1 |
| Secondary education: | | | | | |
| - Gross enrolment rate | 40.5 | 38.5 | 36.5 | 39.7 | 54.1 |
| - Net enrolment rate | - | - | - | 33.8 | 46.4 |

Source: Ghana Statistical Service, 2013; Guengant, 2011, Table 4, p. 22.

There are some gender differences in the gross enrolment rates, with boys having higher rates than girls (Figure 1). At the lower levels [kindergarten (KG) and primary], however, the gap is closing and at the KG level the rate is higher for girls than boys. That is an indication that girls' enrolment at the basic level is increasing in recent times. A testimony of that is a gender parity index of above one at the KG level, which drops to a very low rate at the senior high school level (Figure 2).

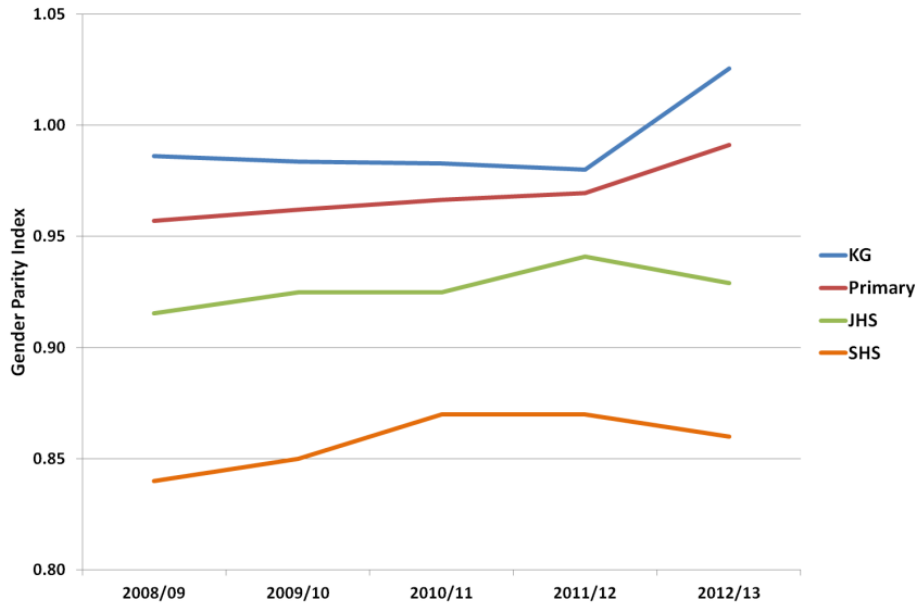
Figure 1: Gross Enrolment Ratios by Gender, Basic Education, 2008/9-2012/13



Source: Computed from Ministry of Education records, 2013

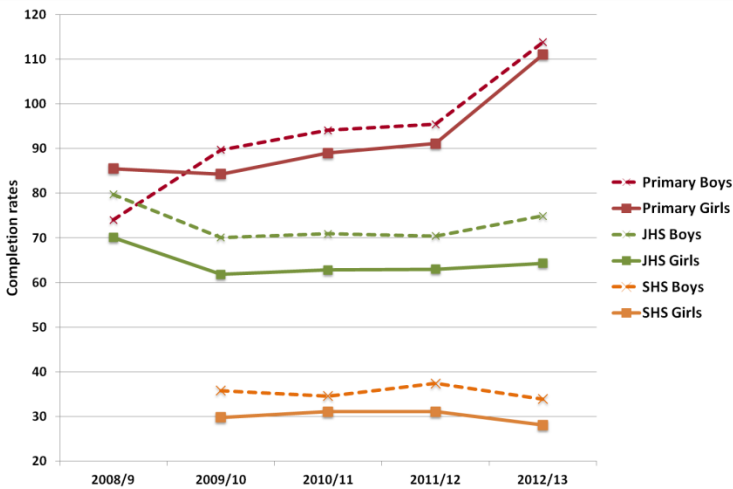
Not only are girls disadvantaged in terms of access to schools, they are also more likely not to complete school at any level – boys have higher completion rates at primary, JHS and SHS levels (Figure 3). In addition, as with enrolment, completion drops the higher the level of education, with far fewer girls completing SHS than JHS, and fewer still completing JHS than primary. It implies that the country has to work hard, not only to get more girls in school, but also to ensure that they remain in the system if we are to sustain the small gains we have made in the area of fertility so as to deepen the demographic dividend.

Figure 2: Gender Parity Index, 2008/9-2012/13



Source: Computed from Ministry of Education records, 2013.

Figure 3: Completion rates by gender, 2008/9 – 2012/13



Source: Computed from Ministry of Education records, 2013.

Despite the strides that have been made on the educational front, the sector is still bedeviled with many problems. There is evidence that many children are experiencing delays and repetitions in school. The primary school completion rate, although high relative to other countries in the West African sub-region, indicates that one Ghanaian child in five does not complete primary school.

An average student-teacher ratio of more than 30 pupils per teacher is high compared to what pertains in most emerging countries – between 15 and 25 pupils per teacher (Guengant, 2011). Similarly, the net enrolment rate at secondary level, which stands at around 46 percent currently, needs to rise to between 60 percent and 90 percent if it is to catch up with the emerging countries.

Guengant (2011:23) estimates that for Ghana to attain educational levels comparable to those seen in the emerging countries today, it needs to increase its net primary enrolment rate to 100 percent, net secondary enrolment rate to 60 percent and gross enrolment rate to 15 percent at tertiary level by 2030. He further notes that achieving a given goal that is three times higher than its initial level within 20 years will require sustained growth in resources of 5.5 percent per year during these 20 years. This will certainly pose a challenge to the country but it is not beyond its means if only the necessary human and financial resources are mobilized, and more importantly, if fertility continues to decline.

Health

The key health issues that must be addressed in order for Ghana to reap the demographic dividends are child health (including neonatal care), nutrition, care of the elderly population and family planning. There is also a growing concern about non-communicable diseases that need to be brought under control. Although these pose a developmental challenge, they could be turned into opportunities depending on what we put in place as policy measures. The health of the population has to be improved through greater access to potable water supply, improved sanitation, health care services and personnel, prenatal and antenatal care, nutrition and child immunization.

The available data indicate that some progress has been made but there is the need to do more to achieve a satisfactory state of health for the population which obviously is an important milestone towards increased productivity for economic growth. The doctor-population ratio has improved from as high as 21,500:1 in 1960 to about 9,000:1 in 2008 (Guengant, 2011: 24) and is

perhaps even less currently. According to the same report, the population with access to potable water supply has improved (although the rural areas remain disadvantaged) while access to sanitation remains quite low at less than 15 percent. However, there has been a steady increase in antenatal health care attendance (i.e., 96 percent for at least one visit and about 87 percent for the recommended four visits) although skilled delivery remains far lower at 68 percent (GSS, 2012). The big gap between antenatal care attendance and skilled delivery contributes greatly to infant and maternal mortality in the country. Meanwhile, the maternal mortality ratio, which was reported to have declined from 451 per 100,000 live births in 2007 according to the Maternal Health Survey to 350 per 100,000 live births by 2006, is said to have increased to 485 per 100,000 live births according to the 2010 Population and Housing Census (GSS, 2013). This suggests that all is not right with the programme interventions so far implemented. These findings further underpin very serious medical and health problems, especially with respect to unprotected sex and reproductive health among the youth. On the other hand, the under-5 mortality rate fell from 118-135 in the early 1990s to 111-113 per 1,000 children in the early 2000s. Recent estimates show that under-5 mortality has dropped to 88-90 per 1,000 (GSS et al., 2009 and GSS, 2013).

According to the demographic dividend, however, key actions could be undertaken to turn Ghana's fortunes around. These are in the following areas: further fertility reduction; increases in modern contraceptive usage and further reduction in the proportion of women marrying before age 18 years. When all these are achieved, their corresponding effect will be reduction in maternal and infant mortality, reduction in malnutrition and enhancement in women's well-being and empowerment. For example, it is known that when infant mortality declines, the likelihood of fertility also declining is quite high, considering that couples would be assured that children born to them are likely to survive to adulthood. To achieve this, efforts must be made to increase the patronage of Ghanaians of modern family planning methods using community-based distribution outlets. Thankfully, the National Health Insurance Law has been reviewed to include clinical methods of family planning in the coverage of the National Health Insurance Scheme (Government of Ghana, 2012). What is important is its operationalization to ensure that more

people, particularly those with unmet need for contraception, will now have expanded access. The successful implementation of these and other related policies and programmes will most likely lead to the number of pregnancies being reduced, thereby reducing the number of deaths that may be pregnancy-induced.

Alongside efforts to increase the contraceptive prevalence rate in the country, abstinence as a virtue should be inculcated in Ghana's adolescents and teenagers. Public-private partnership and collaborative programmes should be undertaken with faith-based and civil society organisations that are already involved in adolescent sexual and reproductive health-related programme implementation. The successful adoption of abstinence as a virtue among adolescents would go a long way towards reducing the proportion of women who marry and/or give birth before age 18 years. This would promote good health among the young persons, which would in turn positively affect productivity and economic growth in general.

Furthermore, immunization (particularly against measles) should be expanded to cover all children. More education on health facility-based deliveries would be helpful in achieving this objective. Already, antenatal health care service patronage is very high in the country and, therefore, integrating the benefits of health facility delivery into the antenatal care educational programmes has the potential to convince more women to deliver in health facilities in the care of trained health professionals. The use of the community-based health planning services (CHPS) cannot be lost sight of, suggesting the need for expansion of the CHPS facilities, particularly in rural communities. These measures could have a positive impact on neonatal mortality, which is also of concern in the country.

Again, considering that Ghana's population is beginning to show signs of an increasingly ageing proportion, it is important that the health delivery system considers integrating health education programmes that target the elderly population. For example, diseases associated with ageing, including non-communicable diseases such as diabetes, hypertension, cardiovascular problems and cancers are becoming quite common in Ghana. More attention should be paid to

the preventive health delivery aspect of these diseases which largely become more pronounced with ageing. Public education on the importance of regular exercises and eating habits becomes critical in efforts towards ensuring that many people could avoid these diseases as they grow old.

When these steps are taken, the country would be seen to be on the road to achieving the demographic dividend the current population dynamics present. Ultimately, therefore, these processes would produce wanted pregnancies and babies, along with expanded access to primary and preventive health care in an economy that is able to address the health needs of the people and make them economically productive in the interests of national development.

Governance

Ghana has since 1992 enjoyed a stable democracy within a sub-region which has largely been politically unstable. Governments in Ghana have been changed through democratic elections. However, the democratic process has to take advantage of the demographic situation of the country to ensure its sustainability. Areas of critical importance include transparency in political administration, youth participation in decision making, gender inclusiveness and social protection, accountability, media plurality.

Ghana's large youthful population could be an asset or a threat to its democracy depending on how it is integrated into the decision-making processes. Youth participation in the governance of the country should be expanded to guarantee the youth a voice in national political activities. This would require programmes that are aimed at providing the youth with relevant education and training to build their capacity for political discourse. The educational system would have to be restructured to ensure that the youth are equipped with the requisite knowledge and skills not only for public sector jobs but most importantly also for job creation within the private sector. The objective should be to achieve full employment, particularly among the youth, in order to avoid a situation where they would only be available as tools for political manipulation to foment acts that could lead to political and social instability.

Linked to the foregoing is the need to deepen transparency in the governance of the country. The large, youthful population is rapidly becoming politically enlightened and sophisticated. Benefits could be derived from this large army of politically enlightened youth by pursuing transparency in governance through educational campaigns that are devoid of propaganda. Once the youth are adequately fed with accurate information on relevant socio-economic development issues, they will be actively involved in championing positive strategies and interventions that enhance their lives. The National Youth Authority exists as the channel to facilitate the social and political integration of the youth in the country and could be used to facilitate transparent political administration.

Again, accountability in governance constitutes the cornerstone of democratic institutions in contemporary times. When the government is accountable to the people, political stability is sure to be attained. This could be achieved through the establishment of institutions and agencies that have legal and political support to instill accountability in leadership. It is to be noted, however, that the establishment of institutions alone will not be enough – accountability demands commitment from leadership at the highest level. When this is achieved, the large, youthful population will have enough faith and hope in the political system to forestall any political upheavals that have the potential to derail the democratic process.

Another demographic feature of Ghana relates to a relatively higher proportion of females to males in the population, which raises issues of gender relations. The socio-cultural environment in Ghana depicts gender challenges that ought to be overcome as part of the effort to take advantage of the demographic dividend. For example, fertility decisions are still mainly made by men in marriages and in sexual relations, yet family planning educational programmes continue to be targeted mostly at females as those who directly reproduce. While it is true that women are the most affected by reproductive health problems, it is important to target more males as decision makers for reproduction as a way to hasten the process of Ghana's demographic transition in order to reap more extensively the dividends associated with this transition.

Already, some progressive policies, including laws against gender-based violence and institutions established to protect children, women and the vulnerable in society, have been adopted. Socio-cultural practices such as *trokosi*, female genital cutting, and widowhood rights that dehumanize women have been criminalized. However, implementation is weak and requires re-enforcement. The re-designation of the Ministry of Women and Children's Affairs as Ministry of Gender, Children and Social Protection is a signal in this direction but should be translated into more effective implementation of existing policies and laws to ensure the full integration of women in decision-making processes in the country. There should also be a strengthening of on-going educational campaigns that target all children particularly the girl-child, as a way to bridge the gender gap in education, especially in the rural areas.

Policy Implications and Recommendations

The discussion so far presents many lessons for policy actions in Ghana that are likely to re-position the country to take advantage of the demographic dividend. It is quite clear that Ghana's population dynamics present an obvious case for a demographic transition, which has a range of policy implications for the country as a whole. One fundamental question that has to be answered at the outset, however, is whether policy makers appreciate the ramifications of Ghana's demographic transition and how to benefit from the associated demographic dividend. Notwithstanding the challenge that may be faced in the appreciation of these developments among policy and decision makers in the country, the youthful nature of Ghana's population is a reality and, depending on what policy actions are undertaken, the current population structure could be an asset or a liability to the country's development.

A major policy implication of Ghana's population that has been highlighted in this paper is how to restructure the educational system to make it equip more of its graduates with skills suited to the world of work. At the moment, there appears to be a mismatch between the current system of education and industry, leading to high rates of unemployment among tertiary graduates. This calls for the adoption of a mechanism to periodically undertake national labour market surveys to

collect relevant data to inform policy direction and programme interventions. At the same time, there should be a review of the structure of the economy to make it more responsive to the changing demographics of Ghana.

Again, the nature of the population of Ghana has implications for the wellbeing of the ageing population which has increased in size since the 1960s. The fact that more people live longer has implications for sustainable social security systems and pension schemes. This is particularly important when the workforce is largely employed in the informal sector without any formal social security contributions while working. The government should, therefore, be fully committed to the implementation of the national ageing policy and the pension schemes already adopted. This is very important considering that the extended family system that hitherto provided some economic security during old age is fast breaking down.

Furthermore, the majority of Ghana's population is now urban. This process is shifting the challenge of unemployment and poverty from the rural to urban areas. There is, therefore, the possibility of a change of emphasis on spatial development from the rural to urban areas in order to address the challenge. However, a balance needs to be struck between rural and urban areas in order to ensure that development is brought to the majority of the Ghanaian population wherever they may be located without denying the minority in the rural areas – as is now increasingly the case – their fair share of development interventions. At the same time, steps should be taken to redirect internal migration away from the choked cities and large towns through investment in the creation of economic opportunities in other equally important localities in the country.

As has been noted in the discussion, Ghana's fertility has slowed. Benefitting from the demographic dividend, therefore, will require a hastening of the demographic transition through further sustained decline in fertility. Such a decline will result from successfully meeting the maternal and infant health challenges confronting the country. Efforts towards achieving these goals have implications, such as prioritizing reproductive health programmes by making family planning programme implementation a central feature in Ghana's development discourse. This is

particularly the case when considered against the backdrop of the family planning contribution towards the achievement of all eight Millennium Development Goals (MDGs). This calls for the full implementation of the inclusion of the clinical methods of family planning in the NHIS as another way by which the demographic transition could be hastened and the demographic dividend reaped for the country's benefit.

Finally, the issues raised call for increased high-level commitment to the implementation of policies adopted regarding population and development programme implementation. Institutions and agencies of state established to ensure the attainment of the demographic transition within the shortest possible time should be supported with the required funding (primarily from the state) to deliver on their mandate.

Conclusion

Ghana's population growth over the years has had various implications for socio-economic development. The large youthful population could, for example, be a hindrance to the realization of economic goals when nothing is done to develop its skills. However, a careful analysis of Ghana's population dynamics indicates that the country could now be positioned to take advantage of the demographic dividend. Yet, this will not be automatic and, therefore, requires an appreciation at the highest levels of government and among key stakeholders of the central place population should be accorded in national development discourse. There also needs to be high-level political commitment and determination to implement population-related policies and programmes with a view to reaping the demographic dividend. Until this is done, current population dynamics may pose a serious challenge to Ghana's efforts to attain higher middle-income status. It is important to note also that considering the inter-disciplinary nature of the population-development nexus, several actors, institutions and stakeholders have to be involved in the implementation of the recommendations contained in this paper to achieve maximum results. Irrespective of whatever economic and population policies the nation adopts, population should be seen and accepted as being central to the country's development planning processes similar to the route charted by the Asian Tigers when faced with similar challenges.

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